

A NEW DAWN AND A NEW DOOR

Madam Chairman, Faculty of Saint Joseph's Hospital School of Nursing, proud parents and Members of the Graduating Class of 1960, I thank you for the signal honor of inviting me to join you at your first Communion breakfast for graduates and parents. It is particularly fitting that nurses join in a Communion breakfast, for the very beginnings of nursing had their roots in religion, in the translation of religious belief into active service. The coming of Christianity brought with it an exhortation to look after the sick, and the response has continued to grow, to develop, and to expand for 2,000 years.

The hour of day which you have selected suggests that you are setting your sails forward. Commencement is a "future-looking" time, a time to formulate goals and to seek applications for the knowledge and wisdom you have been acquiring during the past four years.

You young ladies entered nursing because you wanted to serve. You have studied and equipped yourselves with the latest information on taking care of the ill and the afflicted. You have devoted what may have seemed to be endless hours to the study and practice of the special sciences necessary in your profession. And so, I congratulate you at this happy hour for you and your parents.

I am always glad to come home to Rhode Island and particularly glad at commencement time, for there is no group of persons who can inspire me so much as a group of graduates. And, interested as I have been in health during my twenty years as your representative in Congress, I can truly say that a graduating class of nurses from my home State fills me with inordinate pride.

You are entering a field which calls for devoted and sacred service, where you will find many opportunities to render a special kind of assistance to your fellow human beings. Indeed, you are also entering a field that calls for unselfish sacrifice that many people are unable to render. Even though the nursing profession is richly rewarding in satisfactions, it is a field where newcomers are eagerly sought, for it calls -- as you well know -- for superior stamina and super strength. You probably know that our Nation's nurse-population ratio is only 268 nurses per 100,000 today, even though this ratio has increased five-fold since 1910. And you know, too, that this ratio varies quite a bit in the different States of our Nation -- from 98 nurses per 100,000 in Arkansas to 417 per 100,000 in our neighbor, Massachusetts. Rhode Island stands a bit above the average with 275 nurses per 100,000.

All of us are delighted that New England leads the Nation in number of nurses in proportion to the rest of the population, but since Rhode Island is lowest for ratio of nurses for the New England States, you will find plenty of opportunities to serve right here at home. As a Rhode Islander, I should be pleased to see you take up your careers here.

Here modern hospital buildings are beginning to match the natural beauty of our State. In addition to the fine facilities of your own St. Joseph's Hospital, I could mention the new Hattie I. Chaffee Nursing Home in East Providence, and Our Lady of Fatima Hospital with its recent hundred-bed addition in North Providence. There are new rehabilitation facilities at the Rhode Island Hospital, also in Providence. Others are the State Hospital's new rehabilitation center in Cranston, or at the Emma Pendleton Bradley Hospital at Riverside. I mention these as only a few of the 32 hospital projects that have received funds under the Hill-Burton Act. Local moneys are being supplemented by Federal funds to the end that our State will have modern facilities to care for its ill and afflicted. For on the local, State, and National levels we realize that these modern facilities contribute to the efficiency of the medical team as well as to the comfort of the patient being treated.

Yes, if we were to think solely of our own interests here we should try to persuade you to stay at home, but today we must be interested in health for everybody. I for one have been probing into the problems of health for so long now that I have been made forcefully aware of the great need for nurses in other sections of the country and at our overseas bases. I should therefore like to list for you some of the areas for service should you feel the call to broaden your interests, for whatever you are happiest in nursing there will you realize your greatest potential for development and growth.

Should you wish to explore some of the other areas of the country where nurses are needed, you will find challenges in nursing the Indians on Federal Reservations in Western States like Arizona, Colorado, New Mexico, and Utah. There you will also find new and improved hospital facilities made possible after the Indian Health program was transferred to the Public Health Service. Although much has been done to improve the health of these native Americans, there is still more remaining to be done. There are also opportunities and challenges in nursing Eskimos in Alaska.

If you are even more venturous, travel-wise, you can further your careers in nursing at our distant military bases, ministering to the health needs of our military and civilian personnel wherever they are stationed throughout the world. Additional opportunities for world-wide service exist in our Division of International Health of the Public Health Service; should you decide to join this group you would work with health programs in one of 37 countries: perhaps helping with the malaria control program in India, initiating maternal and child health classes for nurses in Saudi Arabia, or working in a public health training center in Pakistan. The wide varieties of needs and opportunities proclaim that health problems surely have no national boundaries. The World Health Organization is exploring and seeking out the spots where assistance can be offered advantageously, for sudden death and rampant disease are still matters of grave concern in many, many parts of the world today.

Just as you may be interested in pioneering into new geographic areas, so you may also wish to direct your pioneering spirit into a role of assistant in research, attempting to discover new treatments, cures and methods of preventing illness. You may want to go down to the National Institutes of Health at Bethesda, Maryland, just outside Washington, where research is being pursued at a feverish pace, and the nurse is a very important member of the research team.

Because the nurse is the one who knows the patient best, who understands his temperament, his likes and dislikes, his hopes and his fears, she can contribute much more to his recovery than her professional duties prescribe. She can add to his over-all faith in his own improvement and in his ability to endure the discomfort, the pain, and the ultimate termination of his suffering. She can also contribute in a very positive way to the overall research plan. Nurses help design equipment and apparatus; they explain procedures to patients and prepare them for special tests and examinations, and they encourage and give support to morale during long, complex phases of a study. Here patience is required on the part of the nurse as well as the person whose case is being studied.

That thoughtful American Pulitzer Prize winner, Thornton Wilder, has reminded us that there is always hope with a new day. "For what human ill does not dawn seem to be an alleviation?" he asked, and I should like to point to the new dawn which you are facing. I see a new dawn in your approach to your work, an approach that began with your

studies at Saint Joseph's and will continue for you after you leave this splendid hospital school. I am thinking of the integration of different branches of the social sciences and the greater emphasis on the development of attitudes, interests, and ideals that lead to good citizenship. I am thinking of a new look and a new outlook with less emphasis on the encyclopedic treatment and more attention to the careful selection of significant personalities, events, and trends. Instead of carrying from your classes all the knowledge you will need for your future use, you will continue to point your efforts toward opening new doors and reaching reasoned conclusions.

And these newly opened doors of your new day will present you with hope as you are constantly reminded of the possibility of seeing your patient returned to the world of useful, purposeful living. You will continue to be concerned not with health alone, but with physical good health as the basis, the foundation, the strong underpinning of the happy serviceable life. High on the list of factors influencing the attitude of the patient toward his illness and recovery is his hope of getting well and returning to his former, rewarding life.

I believe that this attitude of hope is the most important gift that awaits you as you open the door upon the most important blessing of this century. Nursing takes on a fresh, positive, optimistic dimension when you can hope with your patient for the cure of what has

heretofore been incurable. You can hope that, with strong faith in research, leading to a constant quest, a higher percentage of patients than ever before will be completely cured of their ailments.

For, with an aroused consciousness on the part of our research scientists supported by an aroused conscience on the part of the tax-paying public, we are making great strides forward in the healing arts. We now have people living active, productive, happy, near-normal lives although they may have heart disease, diabetes, or mental illness. We have drugs that enable the victim of rheumatic fever to live in confidence that it is unnecessary to have a recurrence of this crippler. We have discovered helpful drugs that lower blood pressure and reduce tension. We even have a drug now that can be taken orally so that many diabetics no longer have to bother with the nuisance of the needle, which insulin formerly required. We have learned reliable methods of diagnosing cancer in early enough stages that the malignancy can be cured with x-ray, surgery, or chemotherapy. And our constant improvements in orthopedic appliances -- artificial limbs and braces that work better and better -- are helping accident victims to be rehabilitated and to resume normal living.

We have made many kinds of progress during the past 60 years, and have come a long way in many arenas of the fight. You probably know about that ledge forming the Child-Crying Rocks down at Charlestown, where traditionally the Indian mothers threw their malformed and misshaped babies, leaving them to die. The explorers who came in later years reported that the adult Indians they found were perfect physical specimens. Now that is one way to assure that the adults will be perfectly formed, but you know it is a drastic way and one we shudder at as a practice today. Thanks to some of the doors that have been opened in discovery and our enlarging concern for correcting defects and weaknesses, we are bringing up larger numbers of perfect physical specimens than ever before. And, with constant vigilance in research, we can hope that a greater and greater number of babies will grow up strong and healthy.

A large-scale project being sponsored by the U.S. Public Health Service and immediately under the administration of the National Institutes of Health is, hopefully, going to help us have more perfect babies, free of the pitiable plight of cerebral palsy and other types of brain and neurological damage. I am thinking of the collaborative perinatal project of the National Institute of Neurological Diseases and Blindness. Brown University and the Associated Hospitals in Providence is one of 15 hospital centers cooperating to see if cerebral palsy and other neurological defects can be prevented in the new-born. 50,000 prospective mothers and their babies will join in this effort, which will include participants throughout the country.

The collaboration will be not only inter-institutional but also interdisciplinary. Within each institution 10 to 15 different areas of interest will be represented. Nurses will be helping the geneticists, epidemiologists, statisticians, psychiatrists, psychologists, sociologists, obstetricians, physiologists, pediatricians, and neurologists. In addition to an information exchange, there will be a giant exchange of personnel as men undertaking a part of the study visit collaborating institutions for periods of days and weeks in order to observe techniques which have been worked out for dealing with special aspects of the problem.

There is great hope surrounding this project and some of you may be helping out with the nursing side; and if you are not connected with the study directly, all of you stand in a position to gain from the findings. For the scientists have strong hopes that this project will open the door to the causes of cerebral palsy so that this damager of brains and neurological systems can be eradicated just as another large cooperative project opened the door to the cause of retrolental fibroplasia. Now the 3,000 or more premature babies born a year do not have to lose their eyesight because now we have learned about the damage to retinas that too much oxygen can cause. And so, when the final results of this collaborative, perinatal project are compiled, the old Child-Crying Rocks of Charlestown will seem even more horrifying than they now do. We can look forward hopefully to a new dawn when there will be no crippled and damaged children because the crippling and the damaging will not be done.

I have been at a good vantage point for seeing some of the needs of the Nation in my role as Chairman of the Subcommittee for Labor, Health,

Education and Welfare of the Committee on Appropriations. I have been grieved at the report of millions of deaf, hard of hearing, and speech defective children in our land. I am gratified to know that there are ways that these defective children can be helped to become useful, articulate and infinitely happier members of our society. I am working to pass legislation extending our educational opportunities for more audiologists, speech therapists, and teachers of the deaf and hard of hearing. For these professional people have a potential for adding not only happiness but for adding to our reservoir of contributing citizens by redirecting our handicapped and this redirection will help to reduce the delinquency bred by discouragement.

In your profession, a new day is dawning also in accelerated opportunities. Although the numbers of nurses have not grown in proportion to the need, hospitals are taking in more patients than before with the same number of nurses. The swelling ranks of nurses aides have extended the usefulness of nurses by freeing some of their time and energy from the chores that less skilled workers can perform. As new information is discovered, you will have greater opportunities, especially in public service.

Young ladies, you are graduating into an era of increased concern for your well-being. The status and stature of the nurse have come a long way since the days of Florence Nightingale and just as the nurse's position as a permanent member of our professional team has been established, so also there has been greater concern with the comfort and well-being of the nurse. You will be nursing in brighter and better equipped hospitals than your sisters of a few graduating classes back. As our American way of life

has continued to flourish and our economic prosperity has continued to grow, we have built for ourselves better housing. Your home nursing assignments will also be more comfortable than were those of your predecessors, for greater numbers of people are living in more comfortable houses than in the past.

But greater than your assured professional stature and status and the physical marks of comfort and well-being is this shining sun of hope I have mentioned that will continue to brighten our horizons. I am glad for you that you are living in a time when our life span is lengthening and when we are going to grow old not only chronologically but also in years of pep, strength, and the possibility of prolonging our productivity and our pleasures. They tell me it is not easy to persuade nurses to enter the field of geriatrics; with new hopefulness this will no longer be true, for here is a pioneering area, a manpower potential that has been disregarded. You are going to be instrumental in returning our senior citizens to channels of accomplishment.

I take great pride in the work which I did that resulted in setting up the first White House Conference on Problems of the Aging which will be held next January. Regional meetings are being held now throughout our country, as preparations are being made to pool the knowledge we have about this constantly growing group of our people. You will be hearing about the results of this conference; and even before next year some of you may be helping with the preparations for this meeting.

You are embarking on your nursing career at a time when we as a nation are more aware than ever before of the influence of environment

upon our health. I have been impressed by the testimony on environment and its influence on world health. Health activities set up to cope with environmental problems have contributed to the virtual banishment of many once-dreaded epidemic diseases such as typhoid fever, cholera, malaria, yellow fever and endemic typhus. We have also taken important steps to rid our living areas of dysenteries and other diseases spread by poor sanitation. We have become aware of the potential dangers of impure water and milk and of the necessity for proper refrigeration.

And having made such progress in stamping out the massive and large-scale killers, we are now concentrating upon the hazards of air pollution, the dangers of chemicals and radiation, and the threat caused by contamination of our water supplies. We are looking with a strong eye and a steady hand at the danger of poisonous substances that may be taken by children or by adults who are unaware of their carcinogenic properties.

Another area of nursing where both patient and nurse have an enlarging hopefulness is mental health. The advances in psychopharmacology, and chemotherapy, the gains in the knowledge of hospital staffing, and the improved methods of diagnosis have brought much hope into a discouraging area. Now, although the numbers of mentally ill continue to grow and the numbers of admissions to hospitals continue to mount, the greater numbers who can be discharged to useful productive life have resulted actually in a decrease in the number of hospitalized mental patients for the past three years. The discovery of tranquilizers and energizers have

made the work of the psychiatric nurse much less strenuous and much more hopeful than ever before.

You are witnessing a dawning realization that we do not have to continue with inadequate hospitals. Although only 8 of the 124 mental hospitals inspected by the American Psychiatric Association were found to merit approval in 1957, this condition is changing. Now we have built more than a hundred mental hospital projects in the United States and territories supported by Federal funds since the beginning of the program, and I know that this number will continue to grow to take care of the large number of people who must be hospitalized. You and I will continue to work toward a goal of reducing this census of mental patients, presently occupying more than half the hospital beds in the country.

Now I have become more and more concerned about the health of Rhode Island and the rest of the Nation during my 13 years as Chairman or as ranking member of the House Subcommittee of the Committee on Appropriations and I believe that my 20 years as the Representative of the 2nd District have equipped me to serve better in that capacity than in any other position. I have learned a great deal in my years in Washington and I am pleased that I have had an opportunity to work for health measures that are paying high dividends to the people of Rhode Island and the Nation as a whole.

When our senior senator from Rhode Island, the Honorable Theodore Francis Green, announced his decision to retire from the Senate, there was some speculation that I might choose to run for his vacated post.

That is a position of honor and esteem and carries with it great prestige, but I have made my decision to remain in the House -- with the support of the electorate -- where I too may press on toward a new dawn and to continue to help open doors of progress.

You young ladies, living in this era of hope, are graduating not only into careers of service and usefulness but also into lives of responsible citizenship. You will be called upon to make many decisions of the type I am making now. The knowledge you have gained -- working with the most precious possession of all - human life -- will help you to make good choices. I congratulate you on your entry into the nursing profession, and I am glad indeed to be a part of the new dawn that we face together.